

CRUSH

Work Order ID 99296

99296

Page 1

April-05-13 1:13:11 PM

Item ID: D3065-7

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Step Spacer

Start Date: 4/04/13

Start Qty: 40.00

~~*40*~~ 38.

Cust Item ID:

Customer:

Reference:

Approvals:

Process Plan: M1-3

Date: 13-04-08 Tooling:

Date:

Run Start

NR1

OC;

Date:

SPC (Y/N):

Date:

NP2

NRK

DQA: _____ Date: _____

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							

Work Order ID 99296***99296***

Page 2

April-05-13 1:13:11 PM

Item ID:	D3065-7	Accept	*N900040100*	Setup	Start	*NS1*	
Revision ID:					Stop	*NS2*	
Item Name:	Step Spacer						
Start Date:	4/04/13	Start Qty:	40.00	*40*	Cust Item ID:		
Required Date:	4/19/13	Req'd Qty:	40.00	*40*	Customer:		
Reference:							
Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 *130* Small Fab	Small Fab Memo Deburr if necessary.	0.00	N/A						
140 *140* Brake NC	NC BRAKE Memo Bend as per Dwg D3065	0.00							P10-1 S/13/04/JR
150 *150* QC Quality Control	QC5- Inspect part completeness to step on W/O Memo	0.00	AS 27 13412						

NCR: Yes No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: John Date: 13/04/10QA Closed: ✓ Date: 13/4/10

Work Order: <u>99296</u>	DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. <u>D3065-7</u>	Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering
NCR No. <u>13-2522</u>	Scrap	<input checked="" type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input checked="" type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality
	Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other
	Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data	<u>13/04/10</u>	<u>140</u>	<u>1</u>	<u>I Scrap bend was not straight</u>	<u>DAS 16 S-8 05/2012 Blow/16</u>	<u>Scrap</u>	<u>✓</u>	<u>DAS 27 S-8 13/04/10 13/4/10</u>	<u>DAS 16 S-8 05/2012 Blow/16</u>
FAULT CATEGORY									
Landing Gear									
Bending	<input type="checkbox"/> General								
Centre Not Concentric to O/S	<input type="checkbox"/> Bend								
Cracks	<input type="checkbox"/> BOM/Route								
Crushed/Crimped.	<input type="checkbox"/> Broken/Damaged								
Cuffs	<input type="checkbox"/> Burrs								
Heat Treat	<input type="checkbox"/> Contamination								
Inspection Strip in Tube	<input type="checkbox"/> Countersink								
Ripples in Bend	<input type="checkbox"/> Cut Too Short								
Torque Waves in Extrusion	<input type="checkbox"/> Drill Holes								
Turning Sequence	<input type="checkbox"/> Drawing								
Wave/Twist in Tube	<input type="checkbox"/> Finish								
	<input type="checkbox"/> Folio								
	<input type="checkbox"/> Grain								
	<input type="checkbox"/> Hardware								
	<input type="checkbox"/> Inspection Incomplete								
	<input type="checkbox"/> Instructions Incomplete/Unclear								
	<input type="checkbox"/> Maintenance								
	<input type="checkbox"/> Mislabeled								
	<input type="checkbox"/> Misread								
	<input type="checkbox"/> Offset								
	<input type="checkbox"/> Out of Calibration								
	<input type="checkbox"/> Out of Sequence								
	<input type="checkbox"/> Outside Dimensions								
	<input type="checkbox"/> Ovalized								
	<input type="checkbox"/> Over/Under tolerance								
	<input type="checkbox"/> Part Incorrect								
	<input type="checkbox"/> Part Lost/Missing								
	<input type="checkbox"/> Part Moved								
	<input type="checkbox"/> Positioned Wrong								
	<input type="checkbox"/> Power Loss/Surge								
	<input type="checkbox"/> Pressure/Forced								
	<input type="checkbox"/> Temperature/Cure								
	<input type="checkbox"/> Weld								
	<input type="checkbox"/> Wrong Stock Pulled								
	<input type="checkbox"/> Other								

Work Order ID 99296

99296

Page 3

April-05-13 1:13:11 PM

Item ID: D3065-7

Accept

N900040100

Setup

Start

NS1

Revision ID:

Stop

NS2

Item Name: Step Spacer

Start Date: 4/04/13 Start Qty: 40.00

40

Cust Item ID:

Required Date: 4/19/13 Req'd Qty: 40.00

40

Customer:

Reference:

Approvals: Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run

Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

160

Chemical Conversion Coat per QSI005 4.1

0.00

160

HandFinish

Memo

0.00

38 7/13/12

Hand Finishing

170

QC3-Inspect Part Finish

0.00

170

QC

Quality Control

Memo

0.00

37X

EJ 13/04/15

180

Identify as per dwg & Stock Location: 6-A 0.00

180

Packaging

Packaging

Memo

0.00

37X

EJ 13/04/15

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							

Work Order ID 99296

April-05-13 1:13:11 PM

99296

Page 4

Item ID: D3065-7

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Step Spacer

Stop

NS2

Start Date: 4/04/13

Start Qty: 40.00

40

Cust Item ID:

Required Date: 4/19/13

Req'd Qty: 40.00

40

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

190

QC21- Final Inspection - Work Order Release

0.00

190

QC

Quality Control

Memo

0.00

13/4/16 JG

ABO/15

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____ NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <hr/> <hr/>	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <hr/> <hr/>

Picklist Print

Page 1

April-05-13 1:13:11 PM

Work Order ID: 99296

Start Date: 4/04/13

Required Date: 4/19/13

Parent Item: D3065-7

Start Qty: 40.00

Required Qty: 40.00

Parent Item Name: Step Spacer

Comments: IPP: C02.11.01 Incorporated D3066-1 IPPKJ/RF
IPP Rev:D Now on Water Jet 06-04-11 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
M2024T3S.040 2024-T3 .040 sheet		Purchased	No			100	sf	468.2877	0.1574	6.627368 7.0			JM3-4-U

Location	Loc Qty	Loc Code
MAT022	468.2876922	
120605	65.8254832	
121197	57.187894	
122136	31.78	
123217	26.994315	
124987	286.5	
		124987

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS								
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other						
Part No. _____ NCR No. _____													
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other			

DART AEROSPACE LTD	Work Order:	99296
Description: Step Spacer	Part Number:	D3065-7
Inspection Dwg: D3065	Rev: B	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

X First Article Prototype

045

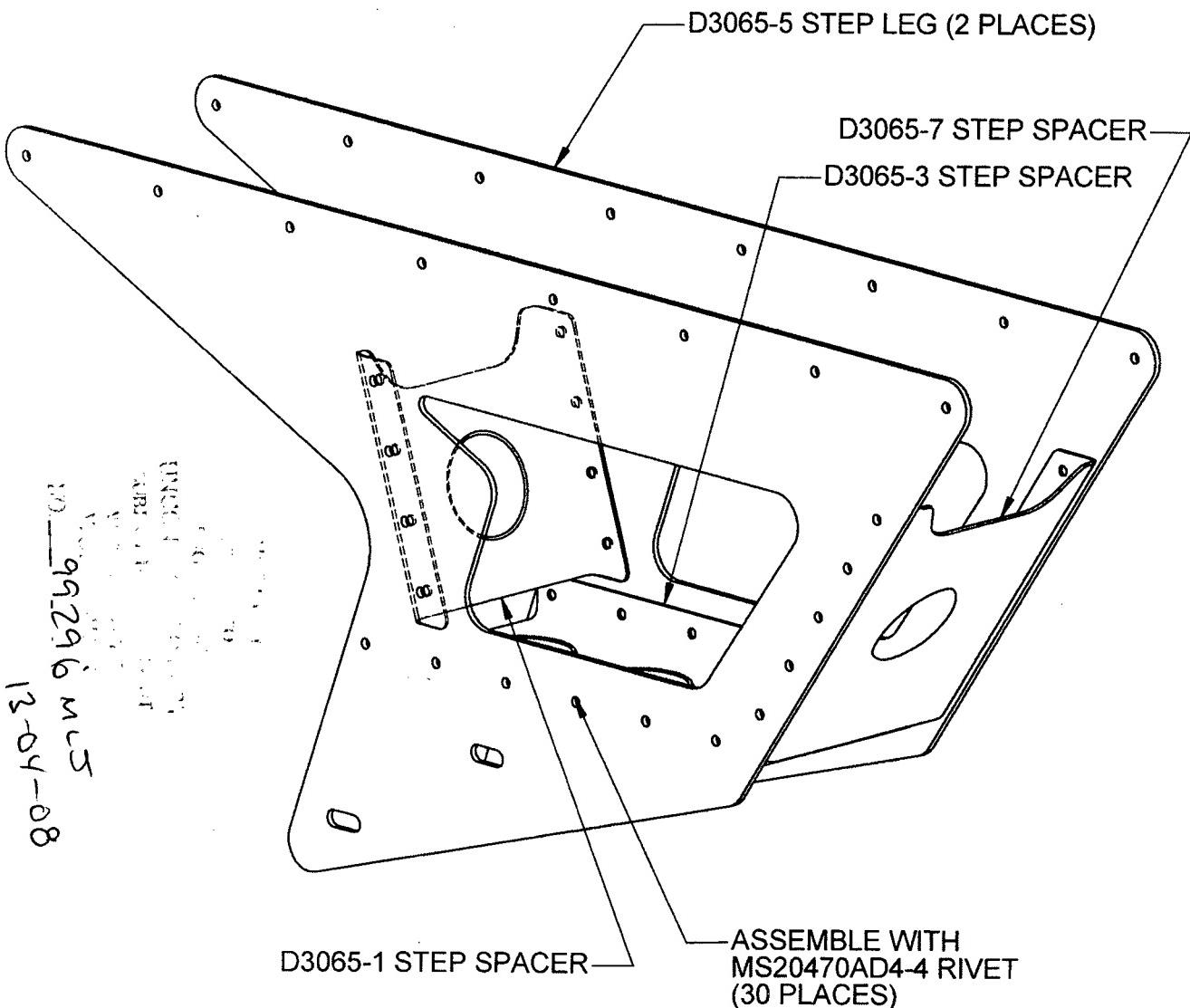
Measured by:	<u>Jm</u>	Audited by:	<u>27</u> <u>8-09</u>	Prototype Approval:	N/A
Date:	<u>13-4-12</u>	Date:	<u>13-4-12</u>	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	03.09.22	New Issue P/O D3065-041	KJ/RF	
B	04.05.15	Removed 0.531, 3.686, 0.580; Added 3.936 dimensions	KJ/JLM	
C	06.06.23	Dwg Rev. changed	KJ/JLM	JM

DART

DESIGN <i>CP</i>	DRAWN BY <i>CB</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA
CHECKED <i>PH</i>	APPROVED <i>[Signature]</i>	DRAWING NO. D3065
DATE 06.05.23	TITLE STEP LEG ASSEMBLY	REV. B SHEET 1 OF 5
A 02.09.11	NEW ISSUE	SCALE 1:2
B 06.05.23	ADD 6061-T6 MATERIAL, ADD SLOTS TO D3065-5	

RELEASED

06.06.20 [Signature]

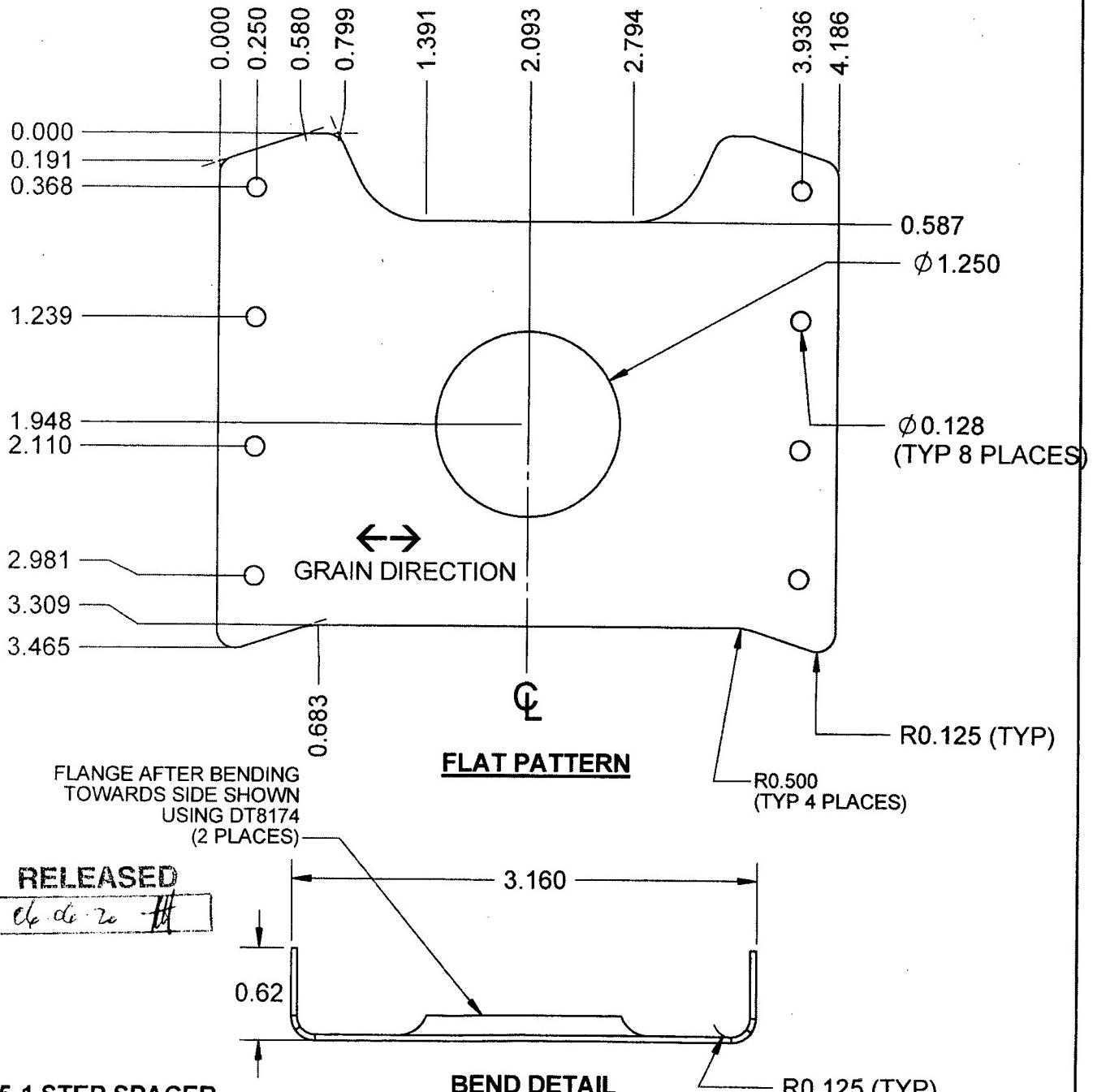
D3065-041 STEP LEG ASSEMBLY

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DART

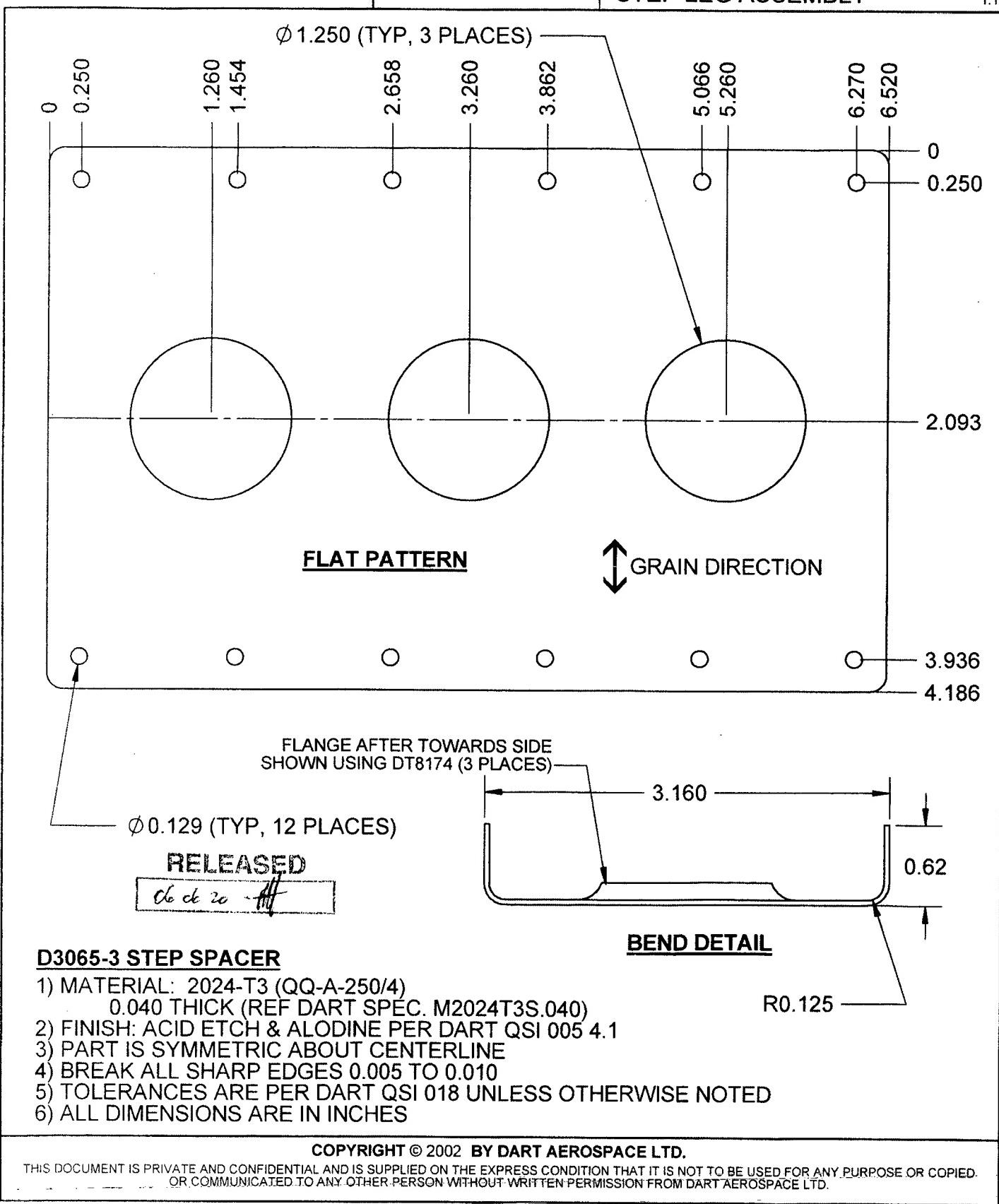
DESIGN <i>CP</i>	DRAWN BY <i>CB</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED <i>PH</i>	APPROVED <i>MM</i>	DRAWING NO. D3065	REV. B SHEET 2 OF 5
DATE 06.05.23	TITLE STEP LEG ASSEMBLY	SCALE 1:1	



- 1) MATERIAL: 2024-T3 (QQ-A-250/4) 0.040 THICK (REF DART SPEC. M2024T3S.040)
- 2) FINISH: ACID ETCH & ALODINE PER DART QSI 005 4.1
- 3) BREAK ALL SHARP EDGES 0.005 TO 0.010
- 4) PART IS SYMMETRIC ABOUT CENTERLINE
- 5) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 6) ALL DIMENSIONS ARE IN INCHES

DART

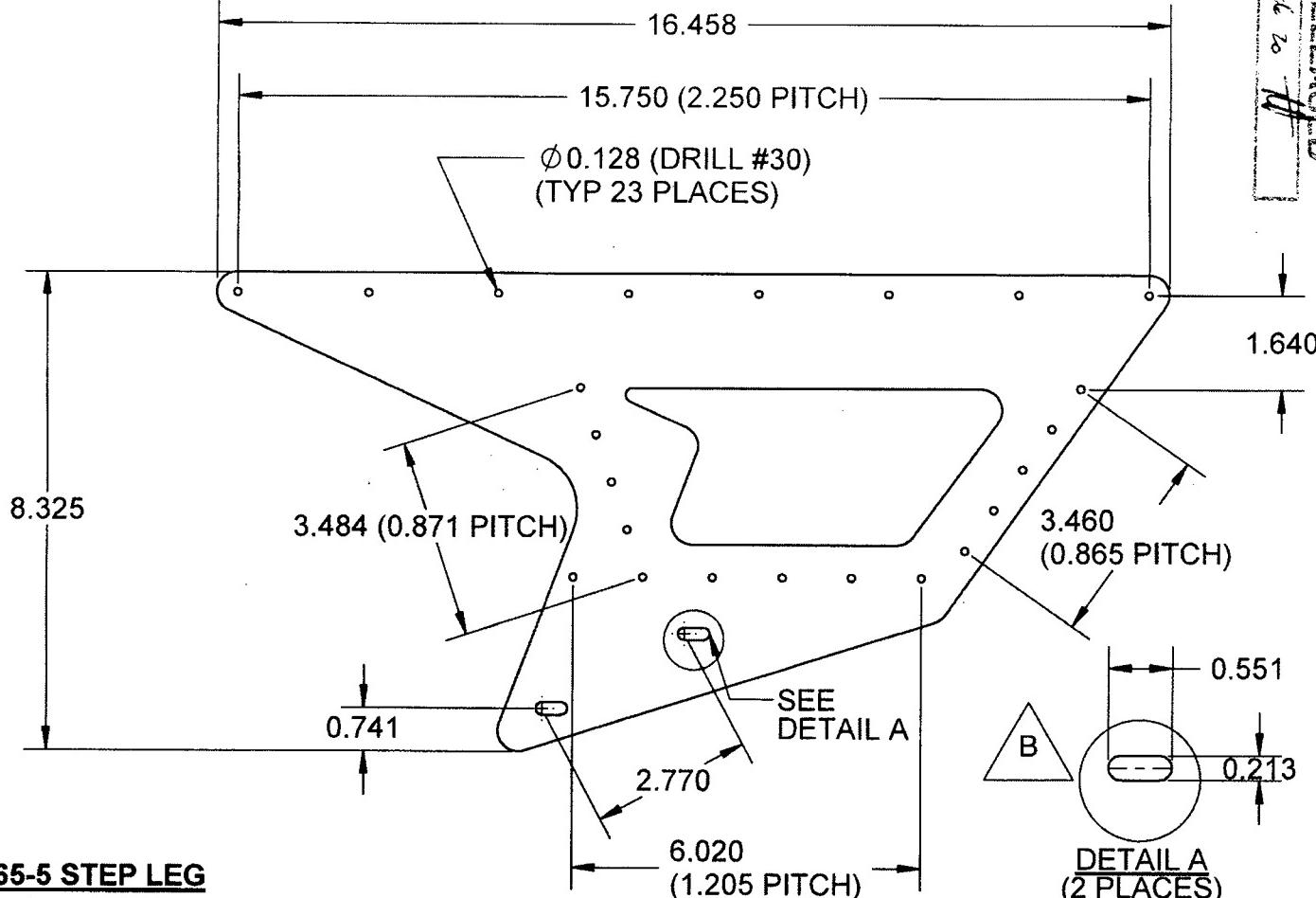
DESIGN <i>CP</i>	DRAWN BY <i>CB</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED <i>PH</i>	APPROVED <i>MM</i>	DRAWING NO. D3065	REV. B SHEET 3 OF 5
DATE 06.05.23	TITLE STEP LEG ASSEMBLY	SCALE 1:1	



99296

DART

DESIGN	DRAWN BY	DART AEROSPACE LTD
CIP	C.B.	HAWKESBURY, ONTARIO, CANADA
CHECKED	APPROVED	DRAWING NO.
JH	JH	D3065
DATE	TITLE	REV. B
06.05.23	STEP LEG ASSEMBLY	SHEET 4 OF 5
		SCALE 1:3

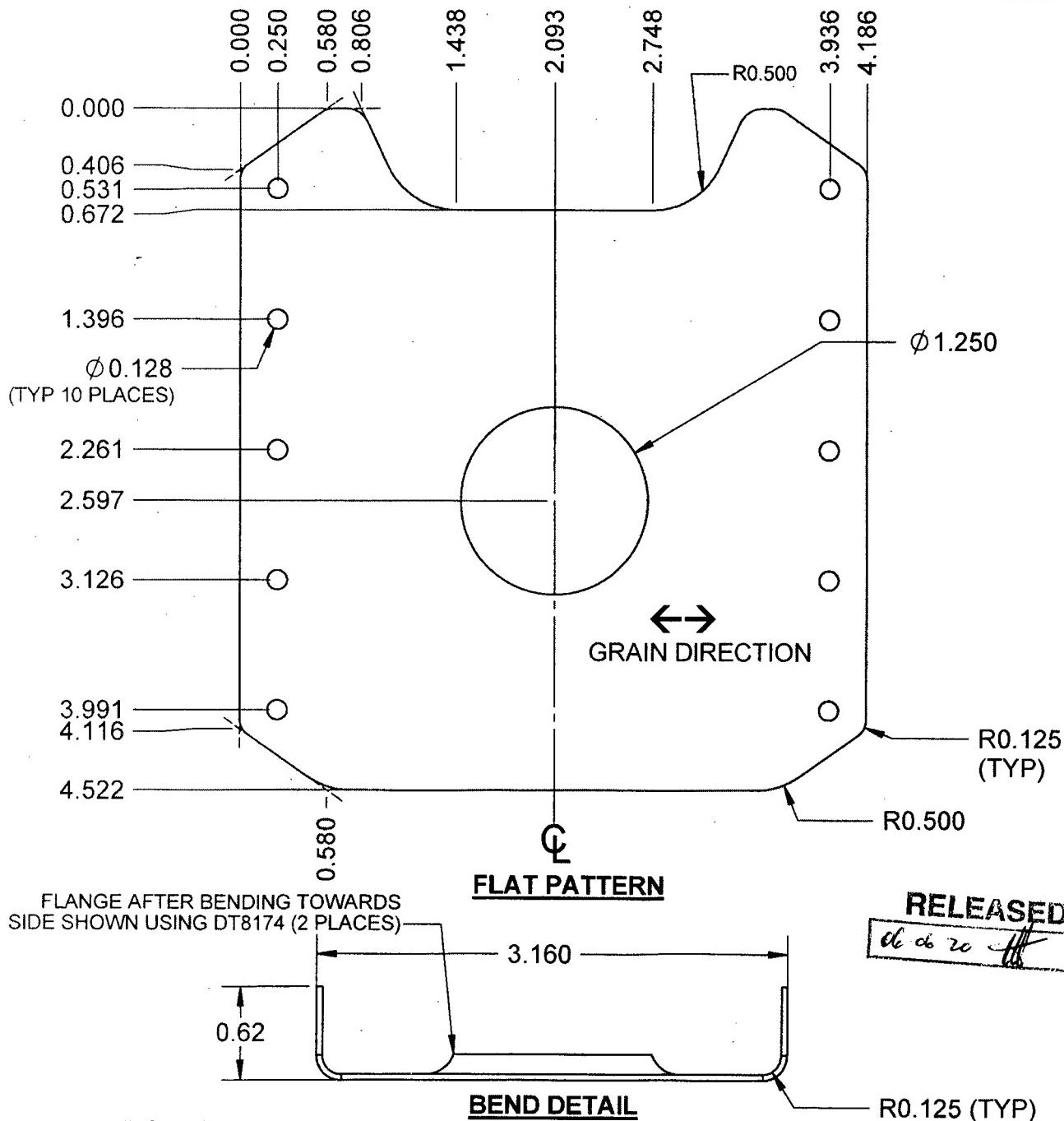


D3065-5 STEP LEG

- 1) MACHINE PER DWG FILE "D3065-5.SLDPRT"
- 2) MATERIAL: 6061-T6 (PER QQ-A-250/11 OR AMS 4025 OR AMS 4027) 0.080" THICK (REF DART SPEC M6061T6S.080)
OR
5052-H32 (PER QQ-A-250/8 OR AMS 4016) 0.080 THICK (REF DART SPEC. M5052H32S.080)
- 3) FINISH: ACID ETCH & ALODINE PER DART QSI 005 4.1
- 4) BREAK ALL SHARP EDGES 0.005 TO 0.010
- 5) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 6) ALL DIMENSIONS ARE IN INCHES

DART

DESIGN <i>CP</i>	DRAWN BY <i>CB</i>	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA		
CHECKED <i>PH</i>	APPROVED <i>[Signature]</i>	DRAWING NO. D3065	REV. B	SHEET 5 OF 5
DATE 06.05.23	TITLE STEP LEG ASSEMBLY	SCALE 1:1		



- 1) MATERIAL: 2024-T3 (PER QQ-A-250/4) 0.040 THICK (REF DART SPEC. M2024T3S.040)
- 2) FINISH: ACID ETCH & ALODINE PER DART QSI 005 4.1
- 3) PART IS SYMMETRIC ABOUT CENTERLINE
- 4) BREAK ALL SHARP EDGES 0.005 TO 0.010
- 5) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 6) ALL DIMENSIONS ARE IN INCHES

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